# BOARD OF COUNTY COMMISSIONERS AGENDA ITEM SUMMARY

Bulk Item: Yes X No	Department: Fire Rescue
	Staff Contact Person: Darice Hayes
Medical Sciences Academy, Inc., (EMS Acad	proval of Affiliation Agreement between Emergency temy) and the Board of County Commissioners of Monroe tue (MCFR) to provide an EMS training environment and through December 31, 2007.
ITEM BACKGROUND: The purpose of the learning experience within a clinical setting for	nis Agreement is for MCFR to provide a comprehensive or EMS Academy students.
PREVIOUS RELEVANT BOCC ACTION between EMS Academy (formerly Para-Me December 31, 2005 this Agreement expired.	N: On July 14, 2004 the BOCC approved an Agreement ed Academy, Inc.) and the MCBOCC for MCFR. On
CONTRACT/AGREEMENT CHANGES: MCBOCC at the September 20, 2006 meeting	A new Agreement to go into effect upon approval by the g; to remain in effect through December 31, 2007.
the EMS Academy and the Monroe County E	commends approval of the Affiliation Agreement between Board of County Commissioners for MCFR so that ronment they require to complete EMS courses.
TOTAL COST: N/A	
	BUDGETED: Yes No
COST TO COUNTY: N/A	SOURCE OF FUNDS: N/A
COST TO COUNTY: N/A	
COST TO COUNTY: N/A  REVENUE PRODUCING: Yes No APPROVED BY: County Atty YES O	SOURCE OF FUNDS: N/A  X AMOUNT PER MONTH Year  MB/Purchasing YES Risk Management YES
COST TO COUNTY: N/A  REVENUE PRODUCING: Yes No	SOURCE OF FUNDS: N/A  X AMOUNT PER MONTH Year  MB/Purchasing YES Risk Management YES  Lequired

Revised 8/06

# MEMORANDUM ATTACHMENT TO AGENDA ITEM SUMMARY

Meeting Date: Sept. 20, 2006	Division:	Emergency Services
Bulk Item: Yes X No	Department:_	Fire Rescue
	Staff Contact	Person: <u>Darice Hayes</u>
AGENDA ITEM WORDING: Request Medical Sciences Academy, Inc., (EMS A Monroe County, Florida for Monroe Coun environment from date of approval of Aff	Academy) and the Board nty Fire Rescue (MCFR)	of County Commissioners of to provide an EMS training
ITEM BACKGROUND: The EMS Aca Services (EMS) courses (EMT-Basic and supervised hours on a licensed ambulance Agreement to provide a resource for a constudents, within a clinical field setting, for General Provisions of Agreement provide Agreement for an additional year with 30 As noted in the section below, a prior Agreeking to renew the relationship between Affiliation Agreement was forwarded to be a service of the course of the clinical Consequence of the course of the clinical Consequence of the cli	Paramedic) must complete. MCFR and EMS Academprehensive learning export completion of the stude of for either party to elect a days prior written notice reement had been in place for dinator of the EMS Academy and	ete a specified number of demy sought this Affiliation perience for the EMS Academy ents' program criteria. The annually to extend the Affiliation e and expired on December 31, cademy contacted Chief Martin Monroe County. An updated
PREVIOUS RELEVANT BOARD AC Agreement between EMS Academy (form MCFR. On December 31, 2005 this Agreement and the second s	TION: On July 14, 200 merly Para-Med Academy	4 the BOCC approved an
CONTRACT/AGREEMENT CHANG the MCBOCC at the September 20, 2006 2007.		
STAFF RECOMMENDATIONS: State between the EMS Academy and the Mon that Academy students can have the train. These EMS courses through the Academy pursuing further courses in the Emergence.	roe County Board of Cou ing environment they req y will also be available for	unty Commissioners for MCFR so quire to complete EMS courses. or locals who are interested in

# MONROE COUNTY BOARD OF COUNTY COMMISSIONERS

CONTRAC	CT SUMMARY
Contract with: Emergency Medical Sciences (EMS)	Contract #
Academy, Inc.	Effective Date: September 20, 2006
	Expiration Date: December 31, 2007
Contract Purpose/Description:  To provide an EMS training environment for studen with Monroe County Fire Rescue.	
Contract Manager: Chief Clark Martin, Jr.	6004 Fire Rescue / Stop #14
(Name)	(Ext.) (Department/Stop #)
for BOCC meeting on Sept. 20, 2006	Agenda Deadline: September 5, 2006
CONTR	ACT COSTS
Total Dollar Value of Contract: \$\ \bign\begin{array}{c ccccccccccccccccccccccccccccccccccc	Current Year Portion: \$
County Match: \$	
ADDITIO	ONAL COSTS
	For:
(Not included in dollar value above)	(eg. maintenance, utilities, janitorial, salaries, etc.)
CONTRA	ACT REVIEW
Changes	Date Out
Division Director  Date In Needed  Yes No	Colland 9-6-06
Risk Management & 8300 Yes No	M. Dlauil 8-31-06
O.M.B./Purchasing 91106 Yes No	Sphalore govelle 9/5/00
County Attorney 8/15/06 Yes No	murinsley 8-2806
Comments:	(made ch. tortlease)

OMB Form Revised 2/27/01 MCP #2

## AFFILIATION AGREEMENT

#### I. PARTICIPATING AGENCIES

This AGREEMENT between EMERGENCY MEDICAL SCIENCES ACADEMY,
INC., hereinafter referred to as the AGENCY, and the BOARD OF COUNTY
COMMISSIONERS OF MONROE COUNTY, FLORIDA, hereinafter referred to as
the AMBULANCE SERVICE is entered into this day of
, 2006.

### II. PURPOSE OF AGREEMENT

It is mutually agreed that the purpose of this AGREEMENT is to provide a comprehensive learning experience for participants from the AGENCY, within a clinical setting, in accordance with provisions of the guidelines set forth in this AGREEMENT.

### III. GENERAL PROVISIONS OF AGREEMENT

- A. Both parties agree that there will be no distinction in employment or placement because of race, sex, color, creed, age, national origin, religion, marital status, disability or handicap and adhere to the provisions of Federal and State laws regarding discrimination.
- **B.** The AMBULANCE SERVICE will provide, to the Participant, at the Participant's expense, emergency care for injuries or acute illness while on duty at the AMBULANCE SERVICE in accordance with the provisions of this agreement.
- C. The term of this AGREEMENT shall be from the date of the AGREEMENT, and shall remain in full force and effect until December 31, 2007. Either party may elect annually to extend this AGREEMENT for an additional one (1) year period upon providing at least thirty (30) days prior written notice of intent to extend. Either party hereto may terminate this AGREEMENT by giving at least thirty (30) day written notice to the other party.

NOTICE: Where notice is required under this AGREEMENT to be given to either party, the notice shall be mailed to:

#### For AGENCY:

Frank Galgano, Program Director EMS Academy, Inc. 600 N. Pine Island Rd., Suite 320 Plantation, FL 33324

#### For AMBULANCE SERVICE:

Clark O. Martin, Jr., Fire Chief/Div. Director Monroe County Fire Rescue 490 63<sup>rd</sup> Street, Suite 140 Marathon, FL 33050

#### IV. SPECIFIC RESPONSIBILITIES OF THE AGENCY

- **A.** AGENCY shall designate a person or persons to coordinate and act as a liaison with the appropriate AMBULANCE SERVICE personnel.
- **B.** AGENCY shall provide the AMBULANCE SERVICE with a list of participants in the learning experience at least ten (10) days before each program is to start.
- C. AGENCY shall insure that participants have the necessary didactic prerequisites to maximize the learning experience at the AMBULANCE SERVICE.
- **D.** AGENCY shall insure that the participants comply with the provisions of Section VI.
- E. AGENCY does undertake and agree that it will indemnify and hold harmless the AMBULANCE SERVICE and its officers, directors, employees, and agents, and reasonable attorney's fees on account thereof, that may be sustained or incurred by reason of any and all claims, demands, suits, actions, judgments, and executions for damages of any and every kind and by whomever and whenever made or obtained, allegedly caused by, arising out of, or relating in any manner to the activity of any participant or participants supplied by the AGENCY pursuant to this AGREEMENT.
- F. AGENCY shall procure and maintain, during the term of this AGREEMENT and any renewal, liability insurance to cover any and all liability (including professional liability) for claims, damages, or injuries to persons or property of whatsoever kind of nature arising out of the activities of the participants carried out under this AGREEMENT. Such insurance shall be on an occurrence basis in amounts no less than \$1,000,000/\$3,000,000 for personal injuries and \$50,000 for property damage; and the AMBULANCE SERVICE shall be an additional named insured under such general and professional liability policy or policies. AGENCY shall submit certificates of insurance to the AMBULANCE SERVICE evidencing such insurance at the time of the execution of this AGREEMENT, and as requested by the AMBULANCE SERVICE. AGENCY agrees that the AMBULANCE SERVICE will receive no less than thirty (30) days written notice prior to cancellation, modification, or non-renewal of any of the insurance coverage's described herein. Participants who do not have patient contact (non-allied health participants) will not be required to be covered by professional liability insurance.

# V. SPECIFIC RESPONSIBILITIES OF THE AMBULANCE SERVICE

It shall be the responsibility of the AMBULANCE SERVICE to:

- **A.** Provide an appropriate orientation of participants in connection with its facilities and its policies and procedures.
- **B.** Provide opportunities for a learning experience with appropriate supervision.
- C. Retain ultimate responsibility for patient care even if that care is given by a participating student.
- **D.** Designate a preceptor (or coordinator) from its staff to act as the liaison with the AGENCY in this AGREEMENT, as appropriate to the learning objectives.

## VI. SPECIFIC RESPONSIBILITIES OF THE PARTICIPANT

It shall be the responsibility of the Participant(s) assigned through this AGREEMENT to:

- A. Comply with the policies and procedures of the AMBULANCE SERVICE.
- **B.** Provide the necessary and appropriate uniform while on duty in the AMBULANCE SERVICE.
- C. Obtain prior written approval of both parties to this AGREEMENT before publishing any material related to the learning experience provided under the terms of the AGREEMENT.
- D. Sign a "Hold Harmless Agreement" with the AMBULANCE SERVICE prior to commencing his/her experience within the AMBULANCE SERVICE of which is attached to this AGREEMENT as Exhibit A.
- **E.** At all times, must wear the appropriate badge on every clinical rotation, and comply in all respects with the student requirements set forth in the requirement sheets.

# VII. REQUEST FOR WITHDRAWAL OF PARTICIPANT

The AMBULANCE SERVICE shall reserve the right to deny any Participant from access to its facilities whose conduct or work with patients or personnel is not in accordance with the policies and procedures of the AMBULANCE SERVICE or is detrimental to patients or others.

## VIII. MODIFICATION OF AGREEMENT

Modification of this AGREEMENT may be made by mutual consent of both parties, in writing, and attached to this AGREEMENT and shall include the date and the signatures of parties agreeing to the modification.

## IX. COPIES OF AGREEMENT

Copies of this signed AGREEMENT shall be placed on file and be available at the corporate office of the AGENCY and in the offices of the AMBULANCE SERVICE.

IN WITNESS WHEREOF the parties hereto have caused this AGREEMENT to be executed in their respective corporate names and their corporate seals to be affixed by duly authorized officers, all on the day and year first set forth above.

(SEAL) Attest: Danny L. Kolhage, Clerk	of Monroe County, Florida
By: Deputy Clerk	Mayor / Chairman
Emergency Medical Sciences Academy, Inc.	MONROE COUNTY ATTORNEY APPROVED AS TO FORM:
Frank Galgano, Program Director	SUSAN M. GRIMSLEY ASSISTANT COUNTY ATTORNEY

# EMERGENCY MEDICAL SCIENCES ACADEMY HOLD HARMLESS AGREEMENT AND RELEASE

I,, am pr Medical Technician or Emergency Medical Technic Medical Sciences (EMS) Academy. My course of it to train, study, and receive instruction at EMS Ac Rescue (County).	instruction at this school requires me
In consideration for the County providing me this instruction, I, the undersigned, agree to indemnic County and its officers, directors, employees, age judgments, claims, costs, damages or injury arising all acts of negligent conduct on my part, however training activity. I agree that I will defend at my lawsuits or proceedings which may be brought age the above and shall satisfy, pay and discharge a entered against the County in any such claims, laws	ify, protect, and hold harmless the ents and assignees from any liability out of or in connection with any and caused, during any instructional of own expense, any and all actions painst the County in connection with any and all judgments that may be
I understand that, generally, while I am engaged is course of instruction and training, I am not consider therefore, I am not eligible for any benefits available Workers Compensation coverage pursuant to Florists successor amendments/statutes).	ered an employee of the County and able to County's employees, nor to
I understand that there are inherent risks in train limited to, my own injury, exposure to blood-contagious diseases and contraction of such disease result in severe injury and even death. I release C any consequences arising out of my training with Co	borne illnesses, and exposure to ses. Participation in this training car County from any and all liability fron
Date of Instructional Activities:  Date	to Date
Signature:	Date:
Witness:	Date: